| U.S. Palent and Trademark Of PATENT APPLICATION FEE DETERMINATION RECORD QUESTION FEE DETERMINATION RECORD GUESTILLE for Form PTO-875 CLAIMS AS FILED — PART I | | | | | Application of Dooket Number | | |
|---|--|---|--|--------------------|------------------------------|---------------------------|--|
| | | | | | | | |
| FOR BASIO FEE (37 CFR 1.18(a)) | NUMBER FILED | NUMBER EXTRA | RATE | FEE | | | |
| TOTAL CLAIMS | | | | 1 | | ATE FEE | |
| (37 CFR 1.18(a)) | minus 20 = | | X 4= | | OR | | |
| (37 CFR 1.16(b)) | minus 3 =. | | X = | | OR X 4_ | ==- | |
| MULTIPLE DEPENDENT C | | R 1.16(d)) | +4 = | | OR X: | == | |
| . If the difference in column | n 1 is less than zero, enter 0 | 'in column 2. | TOTAL | | OR + 5 | | |
| CLAIN | IS AS AMENDED - P/ | KRT II | | ا ا | OR to | TAL | |
| | | olumn 2) · (Oolumn 3) | | | | | |
| 1 // / . 1 00 | CLAIMS HI | GHEST | SMALL | ENTITY | OR C | OTHER THAN MALL ENTITY | |
| TILZZZIA LAM | NOMENT PA | MBER PRESENT VIOUSLY EXTRA ID FOR | RATE | ADDI- TIONAL | · · · · | | |
| Total Or cfa 1.(s(c)) Independent U (37 cfa 1.(s(p)) | 53 Minus | 53 = / | 1 | FEE | | TIONAL FEE | |
| 5 | Alinus | 6 | X : = | . / | DR Xs | = 5 | |
| FIRST PRESENTATION | DF MULTIPLE DEPENDENT CLA | M (37 GFR 1.16(d)) | 1. | | DR XI | == | |
| | _ | | TOTAL ADD'L FEE | | TOTAL | == | |
| 1 / 1 | Jinn I) (Co | lutin 2) (Column 3) | YOU LIFE [| ············· .0 | R ADD'L FI | EE | |
| 1: / <i>~///</i>] pcu | AINING NUIV | HEST HOER PRESENT DUSLY EXTRA | RATE | ADDI | | · . | |
| Total (3) CFR (.18(4)) Independent (3) CFR (.18(6)) | DMENT Minus | OUSLY EXTRA | | TIONAL | RATE | ADDI. | |
| Independent (37 CFR 1.16(b)) | Minus ··· | | | OF | × | FEE | |
| FIRST PRESENTATION OF | MULTIPLE DEPENDENT CLAIM | | X 5= | OR | X s | E . | |
| | THE CHOCK COMM | (37 CFR 1.16(d)) | TOTAL | OR | +1 | | |
| 6-110 Colum | n 11 | • | ADO'L FEE | OR | TOTAL ADD'L FEE | | |
| . CLAI | MS HIGHE | ST | · · · · · | | | | |
| AFTI AMEND | R · | JSLY EXTRA | RATE | ADDI- TONAL | RATE | ADD | |
| (17 CFR 1.16(c)) 5 | 5 Minus | 30 | | FEE | - | TIONAL | |
| Independent (37 CFR.1.18(b)) | Minus | 2. = | X 1 = | OR OR | X.1= | 1 | |
| FIRST PRESENTATION OF M | ULTIPLE DEPENDENT CLAIM | (37 CFR (.16(d)) | | OR . | X \$ | 1 | |
| | | | TOTAL | OR OR | TOTAL = | | |
| | ss than the entry in column 2 dously Paid For IN THIS 8P lously Paid For IN THIS 8P | | ADD'L FEE | OR | ADD'L FEE | | |
| dia of Land | ously Paid For (Total or Inde | pendenii ie iba biabad | 3. | | ÷ | | |
| mormation is rec | ously Paid For Total or Inde julied by 37 CFR 1.16. The Confidentiality is governed by submilling the completed app complete this form and/or se | Information is condead to | imber found in the a o obtain or retain a CFR 1.14. This collect O. Time will vary de is burden, should be | propriate box in c | olumn 1. | | |